

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only

EFS ID: 16828
Application ID: 10064627
Title of Invention: Nitric Oxide (NO) Donor+cGMP-
PDE5 Inhibitor As A Topical Drug
For Glaucoma
First Named Inventor: Mohsen Shahinpoor
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2002-07-31
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: GED-1
Digital Certificate Holder: cn=Mohsen Shahinpoor, ou=Independent Inventors, ou=Patent and
Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: EYoagfQT2qltZ8J6v4+87A==
Total Fees Authorized: \$697.0
Payment Category: CC - Credit Card
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RAM Sequence Number: 497415
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TRANSMITTAL FORM



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Stylesheet Version: 1.0

Attorney Docket
Number:GED-
1Submission Type: Utility Patent
Filing

Nitric Oxide (NO) Donor+cGMP-PDE5 Inhibitor As A Topical Drug For Glaucoma

First Named Inventor: Dr. Mohsen Shahinpoor

SUBMITTED BY

Name: Dr. Mohsen Shahinpoor

Electronic Signature Mark: Mohsen
Shahinpoor Date Signed: 20020731

Name: Dr. David Soltanpour

Electronic Signature Mark: David
Soltanpour Date Signed: 20020731

Name: Mr. Parsa Shahinpoor

Electronic Signature Mark: Parsa
Shahinpoor Date Signed: 20020731

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent

application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration	Declaration1.TIF
declaration	Declaration2.TIF
declaration	Declaration3.TIF
specification	G-EyeDrop.xml
bibd-transmittal	EyeDropapds.xml
fee-transmittal	EyeDropfee.xml

Attached Image File(s):

Declaration1.TIF
Declaration2.TIF
Declaration3.TIF

Comments:

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	GED-1
	First Named Inventor	Mohsen Shahinpoor
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Art Unit	
	Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Nitric Oxide (NO) Donor+cGMP-PDE5 Inhibitor As A Topical Drug For Glaucoma

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01
Approved for use through 10/21/2002, OMB 0551
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		27232		OR <input type="checkbox"/> Correspondence address below	
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Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle if any)			Family Name or Surname		
Mohsen			Shahinpoor		
Inventor's Signature			Date		
<i>M. Shahinpoor</i>			7/31/2002		
Residence: City		State		Country	
Albuquerque		NM		USA	
Mailing Address					
9910 Tanodan Dr, NE					
City		State		Country	
Albuquerque		NM		USA	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle if any)			Family Name or Surname		
David			Soltanpoor		
Inventor's Signature			Date		
<i>D. Soltanpoor</i>			7-31-02		
Residence: City		State		Country	
NY		NY		USA	
Mailing Address					
200 E 90th St GA					
City		State		Country	
NY		NY		USA	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

[Page 2 of 2]

PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page ____ of ____
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Parsa		Shahinpoor	
<small>Given Name</small>		<small>Family Name or Surname</small>	
<small>Inventor's Signature</small> 		<small>Date</small> 7/31/02	
<small>Residence: City</small> Albuquerque	<small>State</small> NM	<small>Country</small> USA	<small>Citizenship</small> USA
<small>Mailing Address</small> 2116 ALTAIR AVE, NE			
<small>Mailing Address</small> 			
<small>City</small> Albuquerque	<small>State</small> NM	<small>ZIP</small> 87110	<small>Country</small> USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<small>Given Name</small>		<small>Family Name or Surname</small>	
<small>Inventor's Signature</small>		<small>Date</small>	
<small>Residence: City</small>	<small>State</small>	<small>Country</small>	<small>Citizenship</small>
<small>Mailing Address</small>			
<small>Mailing Address</small>			
<small>City</small>	<small>State</small>	<small>ZIP</small>	<small>Country</small>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<small>Given Name</small>		<small>Family Name or Surname</small>	
<small>Inventor's Signature</small>		<small>Date</small>	
<small>Residence: City</small>	<small>State</small>	<small>Country</small>	<small>Citizenship</small>
<small>Mailing Address</small>			
<small>Mailing Address</small>			
<small>City</small>	<small>State</small>	<small>ZIP</small>	<small>Country</small>

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FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity
Independent Inventor

TOTAL FEES AUTHORIZED: \$ 697

BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 5511
Expiration Date: 20040131
Authorized Name: Mohsen Shahinpoor
Billing Address: 87108

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 370

Subtotal For Basic Filing Fee: \$ 370

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 23	203	\$ 9	3	\$ 27
Independent Claims: 1	202	\$ 42	0	\$ 0

Subtotal For Extra Claims Fees: \$ 27

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Publication Fee For Early or Voluntary Publication		1	195	\$ 300	\$ 300

Subtotal For Additional Fees: \$ 300